

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <i>01/04/04</i>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51		/				
2		/					52		/				
3		/					53		/				
4	/						54		/				
5		/					55		/				
6		/					56		/				
7		/					57		2				
8		/					58		2				
9		/					59		2				
10		/					60		2				
11		2					61		2				
12		2					62		2				
13		2					63		/				
14		2					64		/				
15		2					65		/				
16		2					66		/				
17		/					67		/				
18		/					68		/				
19		/					69		/				
20		/					70		/				
21		/					71		/				
22		/					72	/					
23		/					73	/					
24		/					74		/				
25		/					75		/				
26	/						76		/				
27		/					77	/					
28		/					78		/				
29		/					79		/				
30		/					80		/				
31		/					81		/				
32		/					82		/				
33		2					83		/				
34		2					84		/				
35		2					85	/					
36		2					86		/				
37		2					87		/				
38		2					88		/				
39		/					89		/				
40		/					90		/				
41		/					91						
42		/					92						
43		/					93						
44		/					94						
45		/					95						
46		/					96						
47		/					97						
48		/					98						
49		/					99						
50	/						100						
TOTAL IND.	8						TOTAL IND.						
TOTAL DEP.	105						TOTAL DEP.						
TOTAL CLAIMS	108						TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMMENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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